

Work Order ID 88707

\*88707\*

Page 1

July-31-12 9:10:13 AM

Item ID: D206-642-113

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Skidtube LH

Stop

\*NS2\*

Start Date: 7/31/12 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 8/03/12 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan:

*W*

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
IIN-D206-642	O

100

\*100\*

DC

Document Control

DOCUMENT CONTROL

0.00

*DAS  
16  
9/3  
2/08/13*

*MLJ 12/07/13*

110

\*110\*

Packaging

Packaging

Pick Kit

0.00

*12/03/13*

120

\*120\*

QC

Quality Control

QC4- 100% Inspect kits for completeness

0.00

*DAS  
16  
9/3  
2/08/13*

*B 80965 LH*

NCR: Yes / No

DQA: Date:

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS														
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Use-as-is <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Machining <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Finishing <input type="checkbox"/>	Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/>	Quality <input type="checkbox"/>	Other <input type="checkbox"/>
Part No. _____			Work Order Update <input type="checkbox"/>																	
NCR No. _____																				
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description			Sign & Date	Verification		QC Inspector							
Doc/Data																				
Equip/Tooling																				
Operator																				
Material																				
Setup																				
Other																				
Process																				
Supplier																				
Training																				
Unapproved																				
FAULT CATEGORY																				
Landing Gear				General																
Bending	Bend	Grain	Ovalized	Pressure/Forced																
Centre Not Concentric to O/S	BOM/Route	Hardware	Over/Under tolerance	Temperature/Cure																
Cracks	Broken/Damaged	Inspection Incomplete	Part Incorrect	Weld																
Crushed/Crimped.	Burrs	Instructions Incomplete/Unclear	Part Lost/Missing	Wrong Stock Pulled																
Cuffs	Contamination	Maintenance	Part Moved																	
Heat Treat	Countersink	Mislabeled	Positioned Wrong																	
Inspection Strip in Tube	Cut Too Short	Misread	Power Loss/Surge																	
Ripples in Bend	Drill Holes	Offset	Other																	
Torque Waves in Extrusion	Drawing	Out of Calibration																		
Turning Sequence	Finish	Out of Sequence																		
Wave/Twist in Tube	Folio	Outside Dimensions																		

Work Order ID 88707

\*88707\*

Page 2

July-31-12 9:10:13 AM

Item ID: D206-642-113

Accept

\*N900040100\*

Setup

Start

\*NS1\*

Revision ID:

Item Name: Skidtube LH

Stop

\*NS2\*

Start Date: 7/31/12 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 8/03/12 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run

Start

\*NR1\*

QC:

Date:

SPC (Y/N):

Date:

Stop

\*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

\*130\*

Packaging

Packaging

Packaging

Memo

0.00

0.00

0.00

140

\*140\*

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

MLT 12/08/17

CMF  
12-08-17

NCR: Yes / No

DQA: Date:

## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

## Picklist Print

July-31-12 9:10:12 AM

Page 1

**Work Order ID:** 88707

**Parent Item:** D206-642-113

**Start Date:** 7/31/12

**Required Date:** 8/03/12

**Parent Item Name:** Skidtube LH

Start Qty: 1.00

**Required Qty: 1.00**

**Comments:** IPP REV:A 10.12.08 PER REV.N DD VERF:EC IPP REV:B 11.09.23 ADDED  
K10111 DD VERF:EC IPP REV:C REDESIGN PER ENG ERROR 11-11-17 JLM  
VERIFIED BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D206-642-151 Replacement Skidtube		Manufactured	No			110	Each	1.0000	1	1	5965		
				<u>Location</u>		<u>Loc Qty</u>		<u>Loc Code</u>					
				FG		1							
					77976		1						
K10111 Saddle, Skidtube 206		Manufactured	No			110	Each	0.0000	1	83347			

**K10111**   
Saddle, Skidtube 206

80965 A  
- was pulled or  
80978  
by - fall

I will pull m  
#80967. ~~12-08-17~~  
m  
12-08-17

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS										
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>								
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>								
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>								
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>									
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance		Initial Chief Eng	Action Description		Sign & Date	Verification	QC Inspector				
Doc/Data															
Equip/Tooling															
Operator															
Material															
Setup															
Other															
Process															
Supplier															
Training															
Unapproved															
FAULT CATEGORY															
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge		<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
														<input type="checkbox"/> Other	